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One Year After Benefit Began, Are Kids in Medi-Cal Getting Autism Treatment?

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It's been one year since Medi-Cal began providing Behavioral Health Treatment for kids with Autism Spectrum Disorder. But critics say long delays and poor planning are limiting access for thousands of eligible children. This is a report for *California Healthline*, a daily news service of the California HealthCare Foundation. I'm Deirdre Kennedy.

Under the new Medi-Cal benefit, children and adolescents up to age 21 who are diagnosed with autism are entitled to speech therapy, occupational therapy -- and ABA therapy, also known as Applied Behavior Analysis.

That treatment is vital for children with autism and their families, says Kristin Jacobson, president of the child advocacy group Autism Deserves Equal Coverage.

(Jacobson): "Just getting through the day is almost impossible. You really can't go out in public, you can't, you know, be on an airplane you can't go to the park or go to the grocery store. Every step is so difficult with a child with autism who hasn't had treatment that it just becomes overwhelming."

The Department of Health Care Services estimates more than 2,000 children are currently receiving ABA services through managed care plans. That's not counting the ongoing behavioral therapy offered to roughly 7,500 kids at the state's regional centers, run by the Department of Developmental Services.

But critics say that's just a fraction of the estimated 75,000 low-income kids on the autism spectrum. Federal law requires the state to provide behavioral health services within 15 days of a request. But children's health advocates say in some parts of California, children are waiting six months or more to get an official diagnosis before they can begin treatment.

(Hardy): "It's a real bottleneck that we're witnessing here."

Kelly Hardy is the senior managing director of health policy at Children Now.

(Hardy): "There are several reasons that kids and families are not making it through the maze and getting ABA services covered in the"

numbers that we would expect. One is needing to get a CDE -- a comprehensive diagnostic evaluation -- and the wait times and the rigmarole associated with that."

It's a common refrain from children's health advocates, that the waiting list for the evaluation is so long.

But according to Sarah Brooks, the deputy director of health care delivery systems at DHCS, there are no waiting lists in the Medi-Cal program. And she says the evaluation is the accepted standard used by many states to determine whether a child has autism or another condition.

(Brooks): "The comprehensive diagnostic evaluation itself takes different times depending on the beneficiary complexity and needs. Multiple appointments may be needed. Other professionals may need to be pulled in for the process ... but it really varies and there isn't an exact time frame that we could provide."

The state has worked pretty quickly to implement the Medi-Cal autism therapy benefit, she says, considering how complicated instituting a new benefit can be.

(Video: "...having a child with autism is like trying to catch a train...")

That's a company video from STE Consultants, with narration by its founder Sarah Trautman-Eslinger. Her group treats children who have already been diagnosed with autism.

She and other autism advocates want the state to scrap the long evaluation process and let kids start treatment as soon as possible, once they have a preliminary diagnosis.

Beyond the lengthy evaluations, there is one other delay-causing concern advocates – and health plans – have raised over and over again, she says. Rates.

(Trautman-Eslinger): "The number-one topic of every stakeholder meeting is 'What are the rates? What are the rates?'"

One year after autism therapy became a Medi-Cal benefit, providers and plans still have no idea what the state is willing to pay for it. Without a rate structure, Trautman-Eslinger says, providers are reluctant to take Medi-Cal patients and health plans can't build their provider networks. Some insurers, she says, just created their own rates.

(Trautman-Eslinger): "For example, Anthem has a Medi-Cal plan; they've announced their rates already. We work with a number of

county health plans in the Bay Area; they have announced their rates because they wanted to create some type of system wherein their Medi-Cal recipients could get services."

That could be problematic, if the state's numbers are different. Twice in the past month, DHCS officials postponed their stakeholder meetings. They say they will announce the final Medi-Cal rates within the next few weeks.

This has been a special report for *California Healthline*, a daily news service of the California HealthCare Foundation. If you have feedback or other issues you'd like to have addressed, please email us at CHL@CHCF.org. I'm Deirdre Kennedy, thanks for listening.